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AUTHOR Dippo, Jeanette, Ed.
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ABSTRACT

Grades or Ages: Grades 7-9. Subject Matter: Health Education (includes chapters covering the following: (a) nutrition, (b) sensory perception, (c) dental health, (d) disease prevention and control, (e) smoking and health, (f) alcohol education, (g) use and misuse of chemical substances, (h) identity and human sexuality, (i) environmental health, (j) consumer health, (k) safety, and (l) first aid. Organization: Each chapter is broken down into an overview, a list of objectives, a list of major concepts, a content outline, a list of learning and evaluative activities, and a list of resources. Instructional Materials are listed for each chapter as references. No provision for student assessment is indicated. No options are listed. (PB)

ED107663

WHAT IN HEALTH ARE YOU DOING?!

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Cover Credits:

The theme of this Health Curriculum Guide Cover is growth. Health is physical, mental, emotional, social, and spiritual growth encompassing every phase of an individual's life. Health instruction, an expanded area of our school curriculum, is learning this growth and therefore helping to meet the needs of each student.

The cover for this guide was designed and drawn by Diane Carloni. Diane is a 1974 graduate of Homer Central High School. She has taken some art instruction as a student at Homer. Diane will attend S.U.N.Y. at Oswego in the fall.

Cortland-Madison Board of Cooperative Educational Services

McEvoy Educational Center

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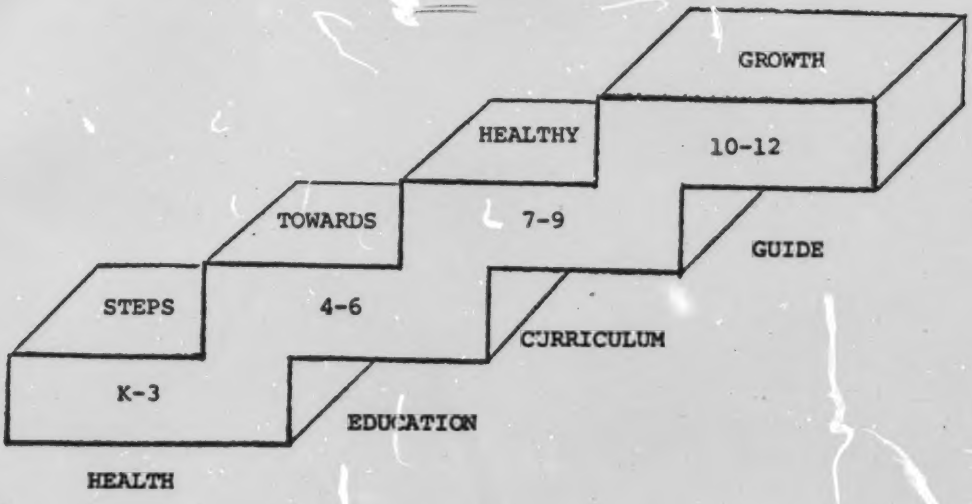
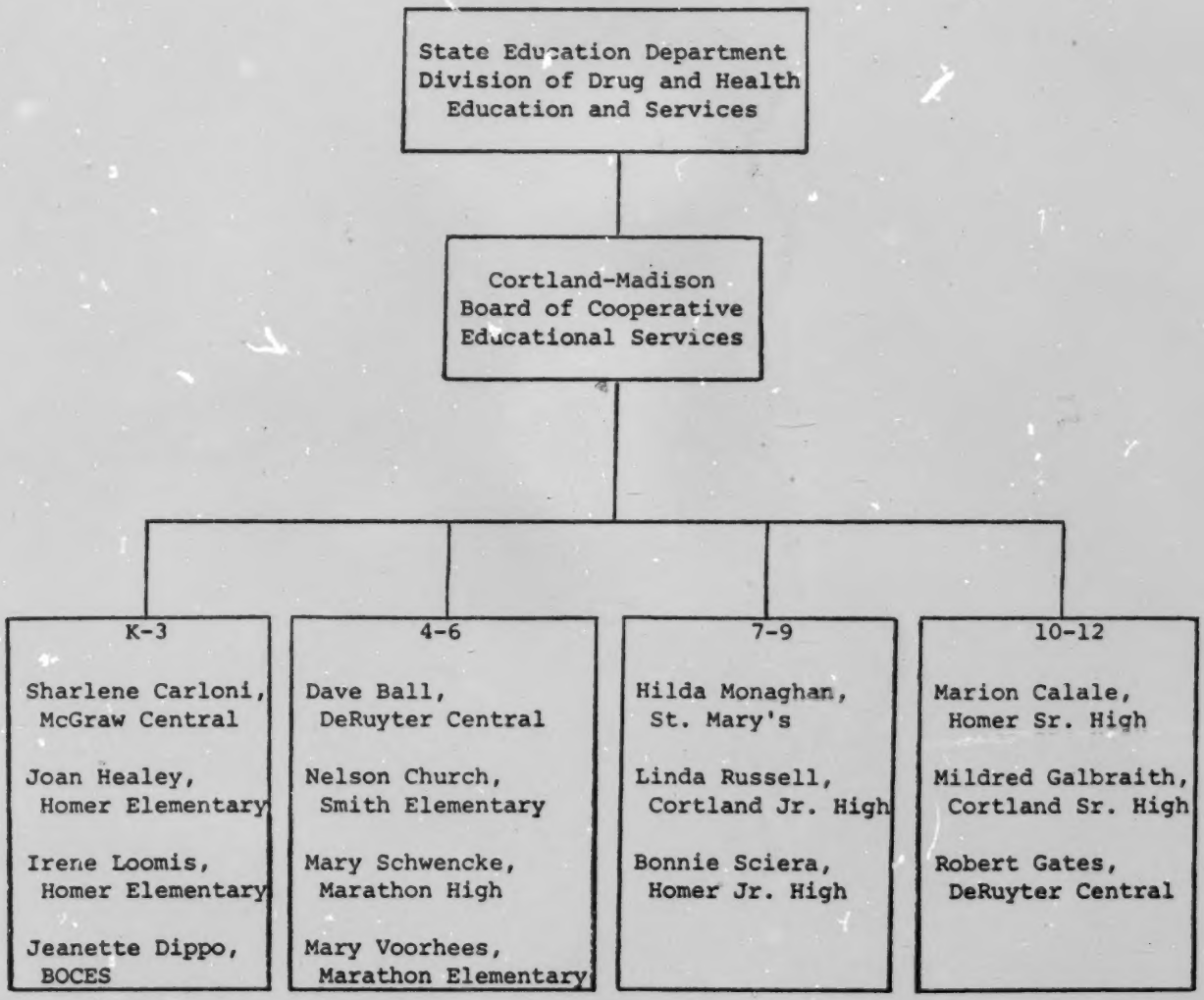
Cortland, New York 13045



Grades 7-9

First Edition
January 1975

Curriculum Development Committee



Program Coordinator/Curriculum Editor: Jeanette Dippo
BOCES Health Education Coordinator

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Cortland-Madison BOCES

BOARD OF COOPERATIVE EDUCATIONAL SERVICES

McEVOY EDUCATIONAL CENTER
CLINTON AVENUE EXTENSION
CORTLAND, NEW YORK 13045

January 2, 1974

Dear Educators:

HEALTH
True or False

_____ Commercial medicines can be used safely if the dose and content are on the label.

_____ The use of "pep" pills or sleeping pills does not require medical supervision.

_____ Legislation guarantees the reliability of any advertised medicine.

_____ Toothpaste is effective in killing germs in the mouth and in preventing cavities.

_____ Fluoridation purifies water for drinking purposes.

_____ Food should never be stored in an opened can, even in a refrigerator.

In a nationwide survey, 70% of high school students endorsed the above statements. Yet all are false. This is an example of the serious misconceptions about health which cry out for modernized school health instruction. So concludes a study sponsored by the NEA, AMA, Office of Education, U.S. Public Health Service, and National Congress of Parents and Teachers.

We, in the schools of Cortland County, are fortunate to have for the past two years, a very dynamic program of Health and Drug Coordination. These Curriculum Guidelines which have been developed through this dynamic program of Health and Drug Coordination, will help to provide better Health Education in our County and thus help to eliminate the deficiency in health education as shown by the previous quiz.

We appreciate the cooperation and coordination that has taken place to make the Health Program within the Cortland County Schools the outstanding one that it now is.

Walter G. Franklin

Walter G. Franklin/jb
District Superintendent

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Forward

The end-product of the two-week summer curriculum construction workshop funded by the Division of Drug and Health Education and Services, SED and sponsored by the Cortland-Madison BOCES reflects the consorted efforts of many persons. The knowledge and expertise of the individual curriculum developers/writers are most worthy of recognition. Other published/printed materials served as foundations for the curriculum subsequently developed. Most notable among these are:

1. Health Education Guide: A Design for Teaching
   Morris Barrett, M. P.H.
   Health Education Associates, Ltd.
   Box 61
   Wynnewood, Pennsylvania 19096

2. School Health Education Study
   1201 16th Street, N.W.
   Washington, D.C. 20036

3. The Healthful Living Program
   Laidlaw Brothers
   River Forest, Illinois 60305

4. Health and Growth Series
   Scott, Foresman and Company
   Glenview, Illinois 60025

Individual New York State Strand Prototype recommendations and Computer-Based Resource Unit suggestions were prime considerations in placement of Behavioral Objectives, Concepts and Content materials.

Introduction

The specific goals of a health education program can be as many and varied as life itself. However, optimal health is dependent upon the interactions of knowledge, attitudes and behavior. The health education program should establish an approach to concepts, generalizations, understandings, facts, values and applications, basic skills, and decision-making processes which can serve as keys to good physical, mental, social, emotional, and spiritual well-being. All participants in the school health education program, including teachers and administrators as well as students, should be assisted in working towards:

1. Acquiring an understanding of his own physical, mental and social health.
2. Developing responsibility toward his own and community health.
3. Acquiring an understanding that the goals of good health result from individual practices and maintenance of those mental, physical, and social habits selected as desirable and good by society and the individual.
4. Acquiring an appreciation of the value of a healthful life.
5. Encouraging systematic development of individual human potential for health, growth and happiness.

There are certain elements necessary for success of a health education program that cannot be written into a curriculum guide. These essential elements come from within the individuals responsible for implementing and carrying out the program:

1. Commitment on the part of administrators and teaching staff to a belief in the value and potential of health education is most important.
2. In view of the definition of health in terms of its psychological physiological, sociological aspects, there needs to be, more than in any other curriculum area, a willingness to work together and lend support in setting up and maintaining a good school health education program - one which is prevention-oriented and clearly above and beyond the minimal requirements for drug and health education as delineated in the Rules of the Board of Regents and the Regulations of the Commissioner of Education.
3. It is possible to improve the classroom experiences of health education students through sincere desire by all directly involved to utilize to the greatest advantage appropriate resources (including those of a human nature) and/or other quality teaching aids, materials and devices which are made available.
4. Support for the concept of student participation and involvement in their own learning is a most meaningful part of a sound health education program. Provision should be made for a diversity of learning approaches including extension of learning into multi-community settings.

A Statement on Philosophy of the School Health Program

Health is an integral aspect of every phase of life. Without health man cannot function effectively in his society. Health can, therefore, be considered not only biological, but psychological and sociological well-being as well.

The School Health Program, which includes all functions and services designed to promote the optimum health in each child, is a flexible blueprint aimed at assisting students in developing into independent, responsible adults. It would seem that no one, be it student or adult, can be independent and responsible unless he is equipped with the health necessary to be so; health that is, in part, imparted by knowledge and understanding of the forces which work in his environment and control his physical and emotional well-being. It is for this reason that, with the guidance of State legislation and the local Board of Education, the School Health Program endeavors to supplement parental responsibility in this realm.

As a result of imparted knowledge, understandings, and good health habits and attitudes, we would hope to kindle, promote, and help each child achieve a state of physical, social, emotional, intellectual and spiritual well-being that would be conducive to such academic learning as the student was capable of acquiring. In short, we aim at helping the student to "become all he is capable of being." This is based on the assumption that health, not being an end in itself, is a means to an end ---- a happy, fruitful life.

The School Health Program itself consists of three main synthetic divisions which should exist in name only since their interworkings are essential to a successful program - Health Services, Healthful School Environment, and Health Instruction. The effective and flexible program must originate with the needs and interests of the individual. From this basis, it should continue to meet the needs of the family, community, nation, and the world...

Implementation of a School Health Program

Whatever the organizational plan, the only significant test of its worthwhileness is the effect which it brings to bear on the total educational program or the opportunity which it affords children to learn.

When the School Health Program is being established or adjusted, certain guidelines or basic principles, if adhered to, will help to insure its success. These are as follows:

1. Develop it gradually rather than superimposing it abruptly.
2. Though idealistic in its announced goals, it is realistic in its current performance.
3. It fosters continuous communication between all school staff members.
4. Special facilities are at its disposal.
5. It is interwoven with the instructional program.
6. It brings its services to every student, not just to those in distress.
7. It plays an important role in the school's public relations program.
8. It is constantly engaged in a process of self-examination.
9. It insures a balance in services it offers pupils.

Once the program is ready to be established, there are certain general fundamentals which should be considered in its administration:

1. There should be centralized control to assure efficient and effective functioning of the total program.
2. Adequate budgeting of finances to provide necessary salaries, supplies, and equipment should be carried out.
3. There needs to be proper coordination of various divisions, departments, and areas.
4. Selection of teachers and health specialists should be based on the best qualifications for the particular school and community.
5. Allotment of sufficient time in the school curriculum for the health program to function effectively is a necessity.
6. Definite assignment of duties and responsibilities to teachers, health specialists, and administrative assistants is a must.
7. Organization of a health teaching program should be on a school-wide basis.
8. Consideration of legal provisions, state and local laws, and requirements pertaining to and affecting the School Health Program should not be neglected.
9. Provisions should be made for assuring maintenance of the school plant and facilities in a sanitary and hygienic manner.
10. Special measures are necessary to recognize and provide for individual physical differences of students.
11. Methods and plans for safeguarding the health of teachers, as well as of students, should be an integral part of the plan.
12. There should be constant and thorough evaluation of the total School Health Program.

Curriculum Overview

The overall goal of this curriculum guide is to assist in developing individuals with the competency to function well in society and the ability to cope with the social, physical, emotional, intellectual, and spiritual dimensions of man. This goal seeks to aid in the discovery of self in relation to others in society and in the world and to implement the concept that decision-making is best where each individual has adequate information and experiences upon which to base his decisions. Decision-making is a cumulative process which results from a growing awareness of self and a growing awareness of the healthful alternatives which the health education process provides.

This guide is a vehicle for preventive education, acknowledging that a primary task of the school is development of positive self-concepts, helping students obtain control over their own lives, and maximizing their health potentialities. It offers a curriculum which helps each individual examine the meaning and value he desires health to have in his life and the life style he envisions necessary to implement his desires and values. It represents curriculum designed to fulfill personal needs and interests via being meaningful and relevant to students preparing to live healthful, productive and rewarding lives.

This rationale is based on concepts which provide for increasing levels of information and experiences related to physical, psychological, and social development as grade level increases. There is decreasing breadth, but greater concentration of information and experiences in various areas of health education as the educational and maturity levels increase providing a continuous and cumulative effect rather than a disjointed one.

Health Education should:

1. Represent a major part of a life-long educational process.
2. Exist for benefit of all students.
3. Represent a process that begins informally during pre-kindergarten years and continues throughout adulthood.
4. Involve total school/community efforts.
5. By its basic nature, revolve around developing a meaningful, satisfying and healthy life.

This particular guide represents one of the four levels of a planned, unified and comprehensive K-12 health education program designed to:

1. Meet the needs of all students.
2. Be sequential, building on developmental tasks at each level.
3. Be flexible in order to facilitate implementation on a county-wide basis.
4. Include behavioral objectives and learning experiences for assisting in the decision-making process.
5. Be easily updated, due to its format, via replacement of pages upon their obsolescence.

Each topical area or unit consists of five basic parts:

1. Overview and Objectives
2. Concepts
3. Content Outline
4. Learning and Evaluative Activities
5. Resources

The unit overview gives a brief orientation to the philosophy regarding the unit. The outline of behavioral objectives reflects the cognitive, affective and action-oriented domains. They signify specific ways students should be able to think, feel, and act after completion of the unit of study.

The concepts and supporting content outlines provide necessary background material for behavioral change. Coordinated with these are suggested resources and learning and evaluative activities from which student experiences may be selected in order to promote desired behavioral changes. The concepts, content outlines, resources, and activities should offer many concrete suggestions to individual teachers for adaption to varied and different teaching needs and situations. However, since there is never enough class time to learn everything about living healthfully, the ultimate decisions regarding specific content inclusion, exact scope and sequence of concepts, and particular student experiences are reserved for the individual classroom teacher.

The curriculum guide contained herein is specifically designed to be descriptive, adaptable and flexible in order to allow for variations in local situations, within particular school systems and communities, and among specific students. Content and process are closely interrelated in health education. Their interaction should lead to the development of responsible decision-making skills which help individuals to use and apply what is learned no matter how often knowledge may change. In essence, there is a need to strive toward conceptualization and internalization of learning rather than pure memorization and fragmentation.

It is with these thoughts in mind that it is reiterated that as much or as little of each of the components of a unit may be used by a teacher as deemed appropriate. This guide is to serve as a model from which individual schools/teachers can build, with the aid of their own students and their own health education programs, taking into consideration the specific needs and interests of their particular pupils and any unique circumstances.

HEALTH EDUCATION CURRICULUM

CONTENT OVERVIEW

K-3	4-6	7-9	10-12
Strand I Physical Health Health Statu Nutrition Sensory Perception Dental Health Disease Prevention and Control	Strand I Physical Health Health Status Nutrition Sensory Perception Dental Health Disease Prevention and Control	Strand I Physical Health Nutrition Sensory Perception Dental Health Disease Prevention and Control	Strand I Physical Health Nutrition Disease Prevention and Control
Strand II Sociological Health Problems Chemical Substances	Strand II Sociological Health Problems Smoking and Health Alcohol Education Drug Education	Strand II Sociological Health Problems Smoking and Health Alcohol Education Use and Misuse of Chemical Substances	Strand II Sociological Health Problems Tobacco Alcohol Drugs
Strand III Mental Health Personality Development, Sexuality, Family Life Education, Death Education	Strand III Mental Health Personality Development Human Sexuality Family Life Education Heredity and Environment	Strand III Mental Health Identity and Human Sexuality	Strand III Mental Health Personality Development Family Life and Sexuality
Strand IV Environmental and Community Health Environmental and Public Health Consumer Health	Strand IV Environmental and Community Health Environmental and Public Health Consumer Health	Strand IV Environmental and Community Health Environmental Health Consumer Health	Strand IV Environmental and Community Health Environmental, Public and World Health Consumer Health
Strand V Education for Survival Safety Education	Strand V Education for Survival Safety, First Aid, and Survival Education	Strand V Education for Survival Safety First Aid	Strand V Education for Survival Safety, First Aid, Survival Education

NUTRITION

OVERVIEW

A well-nourished body is important for an active, emotionally and socially successful life. Knowledge and utilization of the principles of nutrition enable a person to maintain an adequate diet despite limiting environmental and economic factors. Eating habits are formed early in life as a result of environmental and parental training, but can be altered by proper education and the desire to become more physically fit.

OBJECTIVES

Suggested Pupil Outcomes:

1. Relates good nutrition, adequate rest and physical activity to his own growth and development.
2. Can plan and understand the preparation of nutritious meals and snacks.
3. Critically evaluates facts, fallacies and beliefs about foods and food facts.
4. Discovers how behavior while eating can influence body processes in both a negative and positive manner.
5. Recognizes the growing problems of obesity at all age levels.
6. Understands and can apply the modifications of diet that are necessary depending on the age, sex, heredity, activity and state of health of the individual.
7. Relates how temporary and long standing health problems can result from improper food selection and eating patterns.

MAJOR CONCEPTS

1. Good nutrition is the individual's basic responsibility.
2. The foods you eat today have a far-reaching effect on the body physically and emotionally.
3. Food choices need to be distributed wisely among meals and snacks.
4. Every person is responsible for making meal times pleasant and harmonious.
5. Many agencies at both the local and national levels help to protect against unsafe food practices.
6. Patterns of selecting and eating foods are determined by many factors - cultural, economic, mental, physical and social.

CONTENT OUTLINE

I. Nutrition as a Person's Individual Basic Responsibility
   A. Teenager's eating habits
   B. Recent studies of teenager's nutritional status
   C. Nutritional concerns of teenagers

II. The Far-reaching Effect Foods Eaten Today Have on the Body Physically and Emotionally
   A. Nutrients for energy, growth and repair
   B. Emotional problems related to diet
      1. Over-eating, overweight, underweight
      2. Skin problems of adolescence
   C. Physical performance
   D. Adequate rest

III. The Individual's Responsibility For Making Mealtime Pleasant and Harmonious
   A. Importance of togetherness at family meals
   B. Pleasant conversations and surroundings
   C. Good table manners

IV. Food Choices Need to be Distributed Wisely Among Meals and Snacks
   A. Good snacks, bad snacks
   B. Intelligent choices about foods
   C. Vulnerability to food fads

V. Government Action to Protect from Unsafe Food Practices
   A. Nutritional quality control
      1. Standards for enrichment and fortification
      2. Abuse of advertising
   B. Sanitary quality control
      1. Federal Food and Drug Administration
      2. State agencies
      3. Local inspection of eating establishments

LEARNING AND EVALUATIVE ACTIVITIES

1. Test nutritional understanding by the following: two menus, each including favorite teenage foods - one balanced, one unbalanced. Have students choose which is nutritionally adequate and explain why.

2. Write a list of reasons for overeating, overweight, underweight.

3. Explain why an athlete eats an orange slice during a sport's activity.

4. Give the students a list of foods to determine which are used for quick energy, long term energy, growth and repair.

5. Have a mock family dinner.

6. Write an essay explaining why harmony at mealtime is vital for digestion.

7. Peer discussion of food fads.

8. Project a magazine ad and have students evaluate the emotional appeal and mis-advertising concepts.

RESOURCES

Books:

Introductory Nutrition, Guthrie, Helen, 2nd Edition, The C.V. Mosby Company, St. Louis, 1971

Natural Food, Barbara Fenton, 1973

Pamphlets:

Co-op Extension Service
Heart Association
Metropolitan Life Insurance Company
National Dairy Council

Films:

Food Platform, BOCES #832-346, 20 minutes

I Am Joe's Stomach, BOCES (video cassette), 26 minutes

Filmstrips and Cassettes:

Breakfast and The Bright Life, BOCES #392-8

Breakfast Cereals in Today's Lifestyles, BOCES #392-11

Charts:

Nutrition: Carbohydrates, BOCES #CH-1

Nutrition: Protein, BOCES #CH-2

Kit:

Breakfast Source Book (with cassettes), BOCES #123-22

SENSORY PERCEPTION

OVERVIEW

It is, in essence, our senses which keep the body functioning in a state of dynamic homeostasis. The stimuli in our external surroundings are picked up and interpreted in the brain so that we can respond to the sights, sounds, smells, and feelings in the immediate environment. It is the responsibility of the individual to make certain these senses maintain their optimal level. Ignorance of the function of the senses, particularly ignorance of the things that go wrong with the senses, is very widespread. It would, therefore, seem important to try to correct this lack of knowledge and understanding as much as possible.

OBJECTIVES

Suggested Pupil Outcomes:

1. Develop an insight into the nature of the various sense organs.
2. Show that the sense organs are protective measures against the dangers in our external environment.
3. Analyze common sensual disorders.
4. Maintain own senses at the optimal level.
5. Become aware of the medical and para-medical personnel and services available to assist the individual.

MAJOR CONCEPTS

1. An understanding of the structure and function of the sense organs develops an awareness of their importance to the individual.

2. Ignorance of proper functioning of the senses may be detrimental to the well-being of the individual.

3. Qualified medical and para-medical personnel should be consulted for any sensory problem.

CONTENT OUTLINE

I. The Eye as a Receptor
   A. Brief anatomy and physiology
   B. Visual problems
      1. Refractive errors
         a. Nearsightedness
         b. Farsightedness
         c. Astigmatism
         d. Blindness
      2. Strabismus
      3. Cataracts
      4. Glaucoma
      5. Squint
      6. Amblyopia
      7. Conjunctivitis
   C. Common injuries to the eye
      1. Corneal laceration
      2. Contact with chemicals
      3. Use of explosives
      4. Direct exposure to the sun and lights
   D. Medical and para-medical specialists
      1. Ophthalmologist: oculist
      2. Optician
      3. Optometrist

II. The Ear as a Collector and Conductor of Sound
   A. Brief anatomy and physiology
   B. Auditory problems
      1. Ear infections
      2. Sound conduction problems
      3. Deafness
      4. Motion sickness
      5. Vertigo
   C. Causes of injuries to the ear
      1. Noise
      2. Blows
      3. Sharp objects
   D. Medical and para-medical personnel
      1. Otologist
      2. Otolaryngologist
      3. Audiologist

III. Other Senses
   A. Olfactory
   B. Taste buds as receptors
   C. Touch

LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss the danger involved in under water swimming. Example: ear infections, loud sounds, going too deep.

2. Invite the school nurse teacher to discuss the need for vision and auditory screening in school.

3. Discuss the kinds of noise pollution and probable damage.

4. Have a medical specialist talk to the class about the effect of noise on hearing and show by using graphs the amount of hearing loss.

5. Investigate the anti-noise laws in your community.

6. Investigate how position, balance, equilibrium are influenced by space travel.

7. Discuss how the location of sound may be a matter of life or death.

8. List those things which need both sight and sound for accurate identification and appreciation.

9. Blindfold a student and have him identify the area from which clicking sounds are coming.

10. Use illustrations to demonstrate how we see things.

11. List the advantages and disadvantages of contact lenses.

12. Why do some people use tinted glasses?

13. Research efforts: What sensations are involved in eating a dish of ice cream? How does taste enrich our lives? Show the relationship between taste and smell. What effect does the sense of taste have on appetite? How does smoking affect taste, smell and appetite?

14. The rock opera TOMMY can be used to emphasize why the sense of touch is so important. Various pieces can be played to illustrate Tommy's feelings as a child, and in later life. Selections which are especially good are: "Christmas", "There's a Doctor", and "Go to the Mirror."

15. A written investigation on various topics:
    - color blindness
    - the Braillle system
    - "Audio-Ball"
    - one-hand manual alphabet used by deaf-blind people
    - Helen Keller
    - Ray Charles
    - Jose Feliciano
    - Seeing eye dogs

16. In most communities there is a charitable organization which collects eye-glass frames and lenses for recycling. The health classes or even the entire school could become involved with this project.

17. Invite the school nurse teacher to demonstrate to the class the proper technique for the safe removal of foreign or irritating objects from the eye.

18. Discuss how one's life would be changed without various senses. What happens to another sense if one is lost?

RESOURCES

Book:

The Truth About Your Eyes, Derrick Vail, M.D., Collier Books, 1962

Films:

Gateways to the Mind, BOCES #833-2011, 60 minutes

Human Ear, BOCES #831-341, 9 minutes

Introduction to Visual Illusion, BOCES #832-370, 17 minutes

Kevin, BOCES #842-9, 16 minutes

DENTAL HEALTH

OVERVIEW

Of all the professionals today, due to ignorance and misconceptions, the dentist is perhaps the most feared by children and adults. Therefore, society must be re-educated in the role of the dentist and proper health care. Not only do teeth enhance the appearance, but they also allow for normal speech, influence facial expression and begin the mechanical phase of digestion. Yet, the lack of understanding on the part of the individual frequently results in tooth decay and other dental diseases. Since dental health affects the general health and social adjustment of a person throughout his lifetime, the student should develop good oral hygiene practices.

OBJECTIVES

Suggested Pupil Outcomes:

1. Analyze the characteristics of oral structures.
2. Understand the structure and functions of the tooth to determine the value of dental care.
3. Evaluate the factors that contribute to the process of tooth decay.
4. Investigate the diseases associated with poor oral hygiene.
5. Interpret relationships among proper oral practices, appearance of the teeth and mouth, emotional effects on the individual, and social approval and acceptance of others.

MAJOR CONCEPTS

1. Oral structures were meant to serve throughout a lifetime.

2. While the anatomy for each tooth is the same, the function that each tooth performs is dependent upon its location in the mouth.

3. Proper care of the teeth is essential to the individual.

4. Although the exact cause of decay is unknown, many factors contribute to the process of decay.

5. Many oral problems arise because of poor dental hygiene.

6. Dental personnel should be utilized to guarantee the retention of oral structures throughout the life span of the individual.

7. Personal oral health practices are affected by a variety of conflicting intrinsic and extrinsic factors.

CONTENT OUTLINE

I. Characteristics of Oral Structures
   A. Uniqueness of two dentitions
      1. Deciduous
      2. Permanent
      3. Change in number of teeth
   B. Importance of Teeth
      1. Nutrition
      2. Appearance

II. The Anatomy and Physiology of the Tooth
   A. Structure
      1. Enamel
      2. Dentin
      3. Cementum
      4. Pulp
   B. Functions of different teeth
      1. Incisors - cutting
      2. Cuspids - tearing
      3. Bicuspids - crushing
      4. Molars - grinding

III. Proper Care of Teeth
   A. By the individual
      1. Healthful diet
      2. Proper brushing
      3. Regular visits to dentist
   B. By the dentist
      1. Preventive work
      2. Remedial work

IV. The Proneness and Process of Tooth Decay
   A. Factors in the proneness
      1. Absence of fluoride
      2. Females - more prone
      3. Some teeth surfaces more susceptible
      4. Refined diet
   B. Contributive factors in tooth decay
      1. Developmental and systemic disturbances
      2. Dental plaque
      3. Mouth bacteria
      4. Acids
      5. Saliva
      6. Food
      7. Irregular alignment
      8. Gum disorders
      9. Poor habits
      10. Emotional disturbance
      11. Smoking

V. Diseases and Disorders Associated with Dental Health
   A. Malocclusion
      1. Heredity
      2. Poor dental habits
   B. Dental carries
   C. Periodontal diseases
      1. Gingivitis
      2. Vincent's disease
      3. Pyorrhea

VI. Kinds of Dental Personnel
   A. Dentist
   B. Orthodontist
   C. Oral Surgeon
   D. Endodontist
   E. Dental Hygienist

LEARNING AND EVALUATIVE ACTIVITIES

1. List habits which may lead to malocclusion.

2. Discuss job possibilities of two applicants with equal qualifications except that one has attractive smile and one has improperly cared for and decayed teeth.

3. Discuss reasons for fear of dentists.

4. Draw and label a picture of a tooth, listing the function of each part.

5. Use dilute acid on a chicken bone to show how excess acid helps to decay teeth.

6. Invite a dentist to instruct students in maintaining good dental habits.

7. Have a dental hygienist demonstrate steps in proper tooth brushing.

8. Discuss "If carbohydrate foods are so bad for teeth why do teenagers consume so many?"

9. Have children make a collage on varieties of smiles.

10. Have a student group investigate why fluorides are not added to local water supply.

11. Construct a bulletin board which illustrates the abrasive quality of the major dentifrices. A good source for information is "Consumer Reports." This magazine often publishes articles on dentifrices.

12. Written investigations or reports on various areas:
    - New ways to reduce tooth decay
    - Fluoridation
    - Gum diseases

13. An interesting activity for the entire class is to analyze a mouthwash advertisement. What claims does the ad make? What facts are offered? What does the ad really say? Don't forget to look at the picture that accompanies the advertisement. How is it related to the ad? Do ads for mouthwashes seem to say more than they really do?

RESOURCES

Book:

Atlas of the Mouth, Maury Massler, Isaac Schour, American Dental Society

Film:

Teeth, BOCES (video cassette), 12 minutes

DISEASE PREVENTION AND CONTROL

OVERVIEW

Remarkably, man has learned in the last century more about the nature of disease and disease processes than was known by earlier societies. Diseases had been treated by faith, omens, and incantations. With the advent of inquiring minds and technological progress, information regarding the underlying causes and control of various diseases were disseminated throughout the world. The student should be made aware of the causative agents, the methods of transmission and prevention of communicable diseases. The student should attempt to prevent the spread of communicable diseases through a program of desirable personal health habits.

OBJECTIVES

Suggested Pupil Outcomes:

1. Analyze the various infectious organisms and processes involved in the study of communicable diseases.
2. Relate the epidemiology of the causative agents.
3. Evaluate the various mechanisms in the human body which combat the invading organisms.
4. Express an awareness of individual factors involved in the spread of V.D.
5. Examine major roles and contributions of medical research throughout history to modern day.

MAJOR CONCEPTS

1. The discovery of microbes has irradicated the myths concerning infectious diseases.

2. A variety of organisms are involved in the spread of disease.

3. The vectors of disease are transmitted through air, water, direct contact and congenital infections.

4. The body has built-in defense mechanisms to combat disease.

5. V.D., as an infectious disease increasingly prevalent in today's society, needs to be combatted on all fronts.

6. There are complex interrelationships involving man, his environment and disease.

CONTENT OUTLINE

I. Historical Development of Man's Knowledge of Disease
   A. Early beliefs
   B. Discovery of microbes
   C. Role of medical research

II. Organisms Involved in Spreading Disease
   A. Bacteria
      1. Streptococcus
      2. Staphlococcus
   B. Virus
      1. Common cold
      2. Influenza
      3. Viral hepatitis
      4. Cold sore
      5. Childhood communicable diseases
   C. Fungi
      1. Athlete's foot
      2. Ringworm
   D. Protozoa
      1. Malaria
      2. Amebic dysentery
   E. Helminths

III. Methods of Transmission
   A. Direct contact
      1. Human waste
      2. Nose and throat
   B. Indirect contact
      1. Insect vectors
      2. Water
      3. Air
      4. Soil
   C. Congenital Infections

IV. Body Mechanisms to Combat Disease
   A. Skin and mucus membrane
   B. White blood cells
   C. Antibodies
      1. Active immunity
      2. Passive immunity

V. Venereal Disease
   A. Most common types
      1. Syphilis
         a. Transmission
         b. Stages
         c. Complications
         d. Treatment
      2. Gonorrhea
         a. Transmission
         b. Symptoms
         c. Complications
         d. Treatment
   B. Venereal disease control
      1. Individual
      2. Public

LEARNING AND EVALUATIVE ACTIVITIES

1. Write an essay on the importance of the people who have contributed to the irradication of disease.

2. Have students write a list of communicable diseases they have had. Separate them into bacterical, fungal or viral diseases.

3. Discuss the difference between active and passive immunity. Allow students to discover to which diseases they are now immune.

4. Have students present to the class a report on the fly or mosquito as an insect vector.

5. Invite a physician or public health authority to discuss the high incidence of V.D.

6. Discussion concerning how students contract athlete's foot in school or at playgrounds.

7. Some communicable diseases are spread by people who are immune to the disease. The disease germ is in the person's body, but the person is not ill and does not show any disease symptoms. They are known as carriers, One of the most interesting carriers in medical history was a woman known as "Typhoid Mary". Perhaps some students will enjoy learning about the life of this person.

8. Research the successful fight against disease which has been carried on by:

Joseph Lister	Louis Pasteur
Paul Ehrlich	Walter Reed
Ignaz Semmelweis	James Lind

RESOURCES

Books:

Anatomy of the Human Body, Henry Gray, Lea and Fabiger, 1954

Cold War Against Disease, Lucy Kavaler, 1974

Control of Communicable Disease in Man, Abram S. Benenson, 11th Edition, 1970

Germ Free Life, Alvin Silverstein, 1970

The Teenager and V.D., Celia Deschin, 1967

Merck's Manual, School Health Supply

Films:

Be Fit and Live, BOCES #832-275, 18 minutes

Communicable Diseases: They Just Go Around, BOCES #832-288, 18 minutes

Endrocine Glands, BOCES (video cassette), 11 minutes

I Am Joe's Heart, BOCES (video cassette), 26 minutes

I Am Joe's Spine, BOCES (video cassette), 26 minutes

Man-Made Man, BOCES #833-28, 25 minutes

Regulating Body Temperature, BOCES (video cassette), 22 minutes

Solo, BOCES #832-334, 15 minutes

Steps Toward Maturity and Health, BOCES #831-191, 10 minutes

VD Questions, VD Answers, BOCES #832-189, 15 minutes

Work of the Kidneys, BOCES, (video cassette), 20 minutes

SMOKING and HEALTH

OVERVIEW

The science of research has proven decisively that there is a connection between smoking and disease. How do we attack the problem? The lessons of history tell us how! We need another war - a war against the cigarette. It is as simple and as complicated as that.

OBJECTIVES

Suggested Pupil Outcomes:

1. Evaluate the factors pertaining to the establishment of the smoking habit.
2. Express an understanding and awareness of the potential health hazards associated with smoking as they pertain to the individual and society.
3. Through the sufficient understanding of the smoking problem, make an intelligent personal decision whether to smoke or not to smoke.
4. Analyze the effects of a "smoking environment" on a non-smoker and a smoker.

MAJOR CONCEPTS

1. Smoking becomes a habit.
2. The hazards of smoking are many.
3. There are a number of reasons for not smoking.
4. Smokers help to pollute the environment for non-smokers.

CONTENT OUTLINE

I. Developing the Smoking Habit
   A. Habit forming
      1. Taught by others
      2. Learned through experiences
   B. Desirable and undesirable habits
      1. Desirable habits
         a. Effective automatic behavior
         b. Personal satisfaction
      2. Undesirable habits
         a. Decreased personal effectiveness
         b. Personal frustrations
   C. Reasons for development of the smoking habit
      1. Curiosity
      2. Peer pressure
      2. Imitation of adult behavior

II. Physiological effects of tobacco
   A. Respiratory system
      1. Ciliary action
      2. Mucous membrane
   B. Circulatory system
      1. Pulse
      2. Blood pressure
      3. Coronary circulation
   C. Digestive system
      1. Appetite
      2. Salivation

III. Health Hazards
   A. Lung Cancer
   B. Chronic bronchitis
   C. Emphysema
   D. Ulcers
   E. Coronary artery diseases
   F. Physical performance

IV. Pollution for the Non-smokers
   A. Physiological effects of a "smoke-filled" environment
   B. Phychological effects of a "smoke-filled" environment

LEARNING AND EVALUATIVE ACTIVITIES

1. List a number of diseases that are commonly believed to be caused or aggravated by smoking. Assign a small group of students to find the facts which have been determined by research studies and weigh the evidence in each case. Examples are coronary artery disease, ulcers, high blood pressure, anxiety, atherosclerosis, cancer of the lungs, mouth, esophagus, larynx, bladder, and Buerger's disease.

2. Make a bulletin board display of cigarette advertisements and analyze the type of appeals which they utilize.

3. Ask each student to survey at least ten persons who smoke more than a pack of cigarettes a day and ask them if they wish they could stop smoking. Have they ever tried to stop smoking? What advice would they give to a young person who does not yet smoke?

4. Using current cigarette prices, calculate the total yearly cost of smoking one pack of cigarettes a day. Then calculate the cost for a lifetime.

5. See if anyone can propose one good reason for using tobacco. How many reasons can the class list not to use it? Choose another poor habit - for example, obtaining only three hours sleep each night. If they can not find even one good reason for losing sleep, would they be likely to adopt this poor habit?

6. Stage skits to illustrate why a young person might begin to smoke.

7. Assign a student to report on several articles which have been written on how to stop smoking. What suggestions are made? Do they seem to be good suggestions?

8. Survey one or more grades in your school to determine the extent of smoking among teenagers. Make the questionnaire anonymous, requiring only the age of the respondent, age when he started to smoke, amount smoked, and perhaps the reason why.

9. Make bulletin board charts showing the amount of tobacco consumed in the United States in recent years.

10. Make a bulletin board showing the amount of money spent on tobacco in comparison to medical expenditures, food for the family, recreation, etc.

11. Initiate student panel discussion on "Things On Which We Are Dependent." Make a differentiation between helpful and harmful dependence.

12. Have the students write a paragraph or one page essay on one of the following topics: The kind of person I would like to be ten years from now.
    What I want most out of life.

13. Committee or individual reports on the history of the use of tobacco.

14. Construct a smoking machine.

15. Construct a graph showing the rise in death rates from the major diseases associated with smoking.

16. Skit showing how individuals are talked into the use of tobacco by peer pressure.

17. Debate "Which is the worst over a lifetime - alcohol, tobacco, drugs?"

RESOURCES

Books:

Hidden Persuaders, Vance Packard, David McKay Co., Inc., 1957

Teenager and Smoking, Milgram, Rosen Publishing, 1972

Pamphlets:

American Cancer Society
American Heart Association

Films:

Is Smoking Worth It?, BOCES #832-365, 16 minutes

Smoke Screen, BOCES #831-379, 5 minutes

Smoking Past and Present, BOCES #832-366, 15 minutes

Time For Decision, BOCES #832-367, 16 minutes

Time To Stop Is Now, BOCES #831-394, 4 minutes

TV Messages on Cigarette Smoking, BOCES #832-371, 12 minutes

Filmstrips and Cassettes:

I'll Choose the High Road, BOCES #392-13

Professor Persuader, BOCES #392-15

To Smoke or Not To Smoke, BOCES #392-17

ALCOHOL EDUCATION

OVERVIEW

There is a little of the rebel in all of us - especially when we are growing up!! This is often reflected in teenagers' attitudes toward drinking. Many teenagers look forward to their legal drinking age as a threshold to a more glamorous life and often use it as a rebellion against authority. They may think alcohol makes it easier to fit into the crowd, to have friends and to be more attractive.

Every young person growing into adulthood is faced with the decision whether or not to follow the social customs of drinking alcoholic beverages. Those who choose to drink should be aware that there are dangers. Those who choose not to drink at all should not feel any obligation to conform to the pressures of others.

OBJECTIVES

Suggested Pupil Outcomes:

1. Illustrate how the drinking of alcoholic beverages is an accepted cultural practice in the United States.

2. Analyze the emotionalism associated with the use of alcoholic beverages arising out of the controversies about it; when, how, where, and by whom they should be used.

3. Distinguish between acceptable and unacceptable drinking patterns.

4. Accept responsibility for drinking behavior if the decision is made to use alcohol.

5. Evaluate the serious social problems resulting from the inappropriate use of alcohol.

MAJOR CONCEPTS

1. Ethyl alcohol is usually obtained from the fermentation of fruits and grains.

2. Social drinking is acceptable in modern societies.

3. Alcohol affects the body in many ways.

4. The motivations for drinking or abstaining from drinking vary with each individual.

5. The use of alcoholic beverages may result in personal, community, health and safety problems.

CONTENT OUTLINE

I. The Nature of Alcohol
   A. Alcohol as a substance
      1. Ethyl - beverage - fermentation of fruits and grains
      2. Methyl - by-product of wood
      3. Denatured - ethyl plus an additive
   B. Alcohol as a drug
      1. Type of drug: mind-altering
      2. Basic action: depressant

II. Uses of Alcohol in Modern Society
   A. Variety of purposes for alcohol
      1. Celebrations
      2. Parties
      3. With meals
      4. Self-medication
      5. Escape
   B. Prevalence of drinking in the United States
      1. Number of people who drink
      2. Number of people who do not drink
   C. Society's ambivalent attitudes about alcohol
      1. Minimal legal controls
      2. Drinking practices
      3. Advertising and other enticements

III. The Effects of Alcohol on the Body
   A. Absorption into the blood stream
   B. Oxidation - break down in the liver
   C. Elimination - breath, perspiration and urine

IV. The Adolescent and Beverage Alcohol
   A. Reasons for drinking
      1. Curiosity
      2. Peer pressure
      3. Adventure
      4. Imitation of adults
      5. Unaware of dangers
   B. Reasons for not drinking alcohol
      1. Personal reasons
      2. Religious training
      3. Parental pressures

V. Problems Associated with Alcohol
   A. Personal
      1. Physical health
      2. Psychological dependency
   B. Community
      1. Drinking and driving
      2. Crime and alcohol
      3. Family problems
      4. Alcoholism as a disease
   C. Safety
      1. Pedestrian
      2. Industry
      3. Alcohol and medication

LEARNING AND EVALUATIVE ACTIVITIES

1. Make a bulletin board showing the use of alcohol in industry and medicine.

2. Discuss the effect of alcohol on behavior: include and explain why alcohol appears to be a stimulant on the body.

3. Students may formulate a social situation in which a teenager might find himself tempted to drink. A panel may discuss the alternatives and recommend solutions for the individual.

4. Have local police department demonstrate the balloon test procedure, etc. for alcohol consumption.

5. Feed ethyl alcohol to goldfish by pipette. Using different dosages, watch behavior.

RESOURCES

Books:

Alcohol: Our Biggest Drug Problem, Joel Fort, M.D., McGraw-Hill Company, 1973

Atlas of Wines, Hugh Johnson

Encyclopedia of Wines and Spirits, Alexis Lichine

Films:

Alcohol and You, BOCES #833-55, 28 minutes

Curious Habits of Man, BOCES #832-58, 13 minutes

Articles:

"Alcoholism - New Victims, New Treatments", Time Magazine, April 22, 1974.

USE AND MISUSE OF CHEMICAL SUBSTANCES

OVERVIEW

In the early adolescent years a basic overview concerning the different classifications of drugs should be presented. Elementary information about the physiological and psychological effects of the drug when misused is appropriate for this age group.

The strong influence of peers and the realization that present behavior influences future health is an important concept for consideration. Pupils at this age level should have considerable opportunity to verbalize, without condemnation, their feelings about drug misuse as well as time to exchange freely their opinions and ideas with their classmates.

It is the teacher's responsibility to provide an atmosphere conducive to frank discussion and open communication in order that the student may feel secure in seeking assistance if a drug-related problem should arise.

OBJECTIVES

Suggested Pupil Outcomes:

1. Relate basic factual information concerning the nature and characteristics of stimulant, depressant, and hallucinogenic substances.

2. Develop an awareness that drugs and household chemicals have proper uses, but that their potentially dangerous nature demands the student's respect.

3. Identify some of the personal problems related to the misuse of dangerous substances.

4. Assess the laws governing drugs.

MAJOR CONCEPTS

1. Drugs may be classified according to their effects.

2. Drugs and other substances, if misused, may be harmful.

3. Behavior patterns of the individual influence present and future health.

4. Production, distribution, and use of drugs are controlled by law.

5. A variety of factors influence the decision - to use/misuse a substance that is capable of modifying mood and/or behavior.

CONTENT OUTLINE

I. Classification of Drugs
   A. Addicting drugs
      1. Opium and its derivatives
      2. Barbiturates
      3. Synthetics
   B. Non-addicting drugs
      1. Stimulants
      2. Hallucinogens
      3. Tranquilizers
      4. Deleriants

II. The Physical Effects of Misused Drugs
   A. Methods for misusing drugs
      1. Swallowing
      2. Inhaling
      3. Injecting
   B. Potential consequences
      1. Nausea and vomiting
      2. Suffocation
      3. Poisoning
      4. Organic damage
      5. Mental damage
      6. Death

III. How the Behavioral Pattern of the Individual Influences Drug Usage
   A. Causes of drug misuse
      1. Curosity
      2. Sociability
      3. Peer pressure
      4. Rebellion
      5. Boredom
      6. Excitement
   B. Future effects of drug misuse
      1. Psychological dependence
      2. Physiological dependence
      3. Physiological damage

IV. Production and Distribution of drugs
   A. Soft drugs - many produced legally and sold to black markets
   B. Hard drugs - controlled by the American crime syndicate
   C. Present laws governing illegal use of drugs

LEARNING AND EVALUATIVE ACTIVITIES

1. It's not uncommon for people to make generalizations about others because of their appearance or way of acting. This is known as stereotyping - thinking or talking about a person as a member of a group rather than as an individual. Often stereotyping leads to misunderstandings. Role-play a situation in which an innocent, long-haried, jean-clad, bare-footed young person is accused of being a drug-using "hippie" by an older person. When completed, have the class discuss their feelings.

2. James Thurber wrote a fable entitled "The Scotty Who Knew Too Much." The story can be found in The Thurber Carnival. It is easy to turn this fable into a short play. By changing the story line a little, it is a good illustration of what happens when a person knows all of the answers, but hasn't asked any questions.

3. Have the students report on the book, The French Connection by answering the following questions:
   - What did you learn about narcotics smuggling?
   - Why is this such a profitable crime?
   - If you were President of the U.S., how would you stop this illegal traffic?
   - What did you think about the main character in the book?

4. Make a collage of people who are taking risks. For example, people who are: working in a dangerous situation, athletes, daredevils. Then have the class explain how these risk situations are different from the risks of people who abuse drugs. Questions to help start the discussion might be:
   - Who has the greater control?
   - Who is taking the greater chance?

5. Have the students report on the serious drug problem which developed among the American soldiers in Vietnam by answering the following questions:
   - What drugs were abused?
   - How was Vietnam itself involved in the problem?
   - Were the tensions of war a factor?
   - Were the young Americans drug abusers before they went to Vietnam?
   - Is there any evidence that accidental deaths, or bombing "mistakes", were the result of drug abuse?
   - What is being done to help addicted soldiers who have returned to the United States?
   - Is the drug problem more serious in the United States because of returning addicted servicemen?

6. Invite an attorney to discuss the laws concerning drugs.

7. Look up and report on the drug laws in other countries.

8. Two games to improve one's self-concept.

The IALAC Story - I Am Loveable and Capable. A motivational game to evaluate one's self-image.

This story is about people who have bad days and by the end of the day do not feel very loveable and capable. Discuss at the end how the person and others contribute to these feelings.

Circle of Praise

Choose one person to sit in the center of the circle. The people on the outside of the circle compliment the person in some way. Only good things are said and compliments may not be repeated.

RESOURCES

Books:

Drugs from A to Z, Richard Lengeman, 1969

I Am Loveable and Capable, Sidney Simon, Arugs Communications, 7440 Natchez Avenue, Niles, Illinois 60648

Mary Jane vs. Pennsylvania, Ralph Finn, 1970

Physician's Desk Reference, Litton Publications, Inc., Oradell, N.J. 07649

Teaching About Drugs-Curriculum Guide in Drugs K-12, America School Health Association; Pharmaceutical Manufacturing Association, 2nd Edition, 1971

The Pleasure Seekers, Joel Fort, M.D., 1969

The Secret War Against Dope, Andrew Tully, Coward, McCann and Geoghegan, Inc., 1973

Uses of Marijuana, Solomon H. Synder, M.D., Oxford University Press, 1971

Films:

Journey in Time, BOCES #833-85, 26 minutes

Marijuana, BOCES #833-56, 34 minutes

The Perfect Drug Film, BOCES #833-86, 31 minutes

Up Pill - Down Pill, BOCES #833-70, 24 minutes

Filmstrips and Cassettes:

If Drugs Are the Answer...What Are the Questions, BOCES #392-5, set of six

IDENTITY AND HUMAN SEXUALITY

OVERVIEW

Every human being starts life as a microscopic speck. In only two hundred and sixty-six days, the speck increases in size about three million times and develops into a newborn infant. The story of how each individual grows and develops is as dramatic as any tale ever written. Today we are aware of the value of importing to young people factual information of this type as well as positive feelings about human sexuality which are appropriate to their interest and ability to understand. In this area of health education, as in many others, the teacher's attitudes and actions often speak louder than words. When studying human sexuality the young person is not intent solely upon what is said about sex. He is also aware of information conveyed more subtly by the feelings and dispositions displayed by the teacher when talking about men, women, marriage, children and families.

OBJECTIVES

Suggested Pupil Outcomes:

1. Recognize mental health as one aspect of total health.
2. Become a mature personality able to face life's problems.
3. Express understanding of oneself, one's value system and how it is related to total world subsistence.
4. Achieve self-realization and happiness.
5. Develop one's fullest capacity to love and respect.
6. Demonstrate understanding and emotional control by adequately meeting situations that occur in one's environment.
7. Develop and express an understanding and appreciation of the significance of a happy and effective family in present day America.
8. Acquire a knowledge for understanding and the attitudes for accepting roles and responsibilities as a family member.
9. Have an understanding of the interrelationships of the family, cultural influences, and the individual.
10. Express an awareness of the relationship between sexuality and physical and emotional behavior.

11. Discuss with dignity and without embarrassment the problems of growing up sexually.

12. Build a wholesome attitude toward sex.

13. View one's sexuality with maturity commensurate with one's age.

14. Understand the interrelationships of heredity and environment and utilize this knowledge in forming attitudes and behavior.

15. Understand that biological sexuality is only one phase of total maturity.

16. Assume one's sex role and develop high ideals for one's adulthood and future family.

17. Analyze the psychological and physiological changes which are taking place in one's body and how each individual's maturation rate varies.

18. Develop an awareness that death is the final realization in the life of each individual.

MAJOR CONCEPTS

1. Each individual is a unique biological pattern caused by heredity and environment.

2. Personality is the totality of the individual.

3. All human beings have many needs in common.

4. Individuals have varying capacities and abilities for living and working together.

5. There are various types and stages of love.

6. Maturity consists of physical and personality changes.

7. The responsibility and privileges in dating during the transition from adolescence to adulthood allow boys and girls to develop understanding of each other.

8. Mature judgment concerning dating can lead to a good choice in marriage partners.

9. The human fetus develops in an unique manner.

10. Help is available to assist in resolving mental health problems.

11. Life is birth, growth, and finally death.

CONTENT OUTLINE

I. The Individual as an Unique Entity
   A. Heredity
      1. Fertilization
      2. Sex determination
      3. Autosomal inheritance
   B. Environment
      1. Abiotic factors
      2. Biotic factors

II. The Totality of the Individual
   A. Physical factors
   B. Behavior
      1. Drives
      2. Urges
   C. Individual traits
      1. Desirable
      2. Undesirable
   D. Continuous growth of personality throughout life

III. Fundamental Needs of the Individual
   A. Physical needs
      1. Nutrition
      2. Shelter
   B. Emotional needs
      1. Love
      2. Security
      3. Independence

IV. Behavioral Responses to Living and Working
   A. Success
   B. Frustration

V. Fundamental Emotions
   A. Love
      1. Self love
      2. Love of parents and family
      3. Love for a friend
      4. Heterosexual love
      5. Homosexual love
      6. Love for animals
   B. Fear
      1. Superstition
      2. Anxiety
      3. Phobia
   C. Anger

VI. Maturation
   A. Physical changes
      1. Female: external changes
         a. Breast development
         b. Pelvic change
         c. Development of pubic and axillary hair

2. Male: external changes
    a. Voice changes
    b. Development of beard
    c. Enlargement of sexual organs
    d. Development of pubic and axillary hair
3. Female: internal changes
    a. Menstrual cycle
    b. Endocrine balance

B. Emotional changes
1. New urges and feelings
2. Emotional responses
    a. Peer relationships
    b. Dating relationships
3. Value and interest change
4. Awareness of identity

VII. Responsibilities and Privileges in Dating
A. Influential factors in dating behavior
1. Family influence
2. Peer pressure
3. Mass media

B. Disadvantages of early dating
1. Limits emotional growth
2. Curtails relationships with others

C. Dating considerations
1. Asking for a date
2. Accepting or rejecting a date
3. Going steady
    a. Advantages
    b. Disadvantages

D. Dating behavior
1. Kissing
2. Making out
3. Sexual intercourse
    a. Emotional implications
    b. Social implications

VIII. What to Look for in a Marriage Partner
A. Maturity: physical and emotional
B. Good personality
C. Economic responsibility
D. Familial responsibility

IX. Human Reproduction
A. Male reproductive system
1. Structure and functions
2. Male hormones

B. Female reproductive system
1. Structure and functions
2. Female hormones

X. Fetal Development
A. Fertilization
B. Stages of development
C. Birth

XI. Assistance in Resolving Physical and Mental Problems
- A. Family medical physician
- B. Mental health clinic
- C. Religious consultant
- D. Guidance personnel

XII. Death as a Finality
- A. Causes of death: anytime, any age
  - 1. Disease
  - 2. Suicide
  - 3. Accident
- B. Emotions dealing with death
- C. Determination of death

LEARNING AND EVALUATIVE ACTIVITIES

1. Select two boys of equal height, two girls of equal height and compare their school health records for their individual rates of growth.

2. Discuss the physical changes from boy to man and girl to woman.

3. Discuss the need of proper body care and good grooming: sleep, exercise, proper diet, etc.

4. Discuss awkwardness and lack of coordination as a characteristic of this age group.

5. Discuss the condition of acne and the importance of good skin care.

6. Discuss the advantages of giving birth to a baby in the hospital instead of at home.

7. In small groups have students discuss the differences and similarities in the way males and females express sadness, fear, affection, etc. Why?

8. Discuss the different reactions boys and girls experience from love stories, horror movies, etc. Why?

9. Ask each child to write a short paper titled "Why X Is My Best Friend". List on the board the qualities of friendship.

10. Use the board to list as many sentences as possible that demonstrate different uses and meanings of the word "love".

11. Ask the students to give illustrations of how their parents showed love and affection to them from early childhood to the present. Ask the students how they returned this love and affection.

12. Discuss the importance of friendship, the qualities of friendship and how to be a good friend.

13. Discuss the characteristics boys and girls look for in dating partners.

14. Make a list of "What Your Family Expects of You" and compare it with a list of "What Your Friends Expect of You," i.e., telephone use, hair style, dress code, curfew hours, etc.

15. Compare the learning one gets from a close friendship with a member of the same sex and from a dating partner.

16. Present a student-parent panel discussion on the present practices of local dating and/or non-dating.

17. Present a student panel discussion on the responsibilities of the boy; the girl - in dating.

18. Present a skit where a group of girls at a slumber party discuss the conduct of boys on a date.

19. Present a skit where a group of boys in a locker room discuss dates with various girls.

20. Ask the students to develop independent lists on how they would like the other sex to behave in boy-girl relationships. Follow this with an open discussion.

21. Role-play a boy whose parents say he is too young to date.

22. Role-play a girl whose parents say she is too young to date.

23. Discuss this question, "Is it necessary for me to do everything that my friends do and am I strong enough to refuse?"

24. Ask the class to list the advantages and disadvantages of "going steady".

25. Debate the topic, "Today Anything Goes - If You Can Get Away With It!"

26. Discuss the differences between love and infatuation.

27. Discuss how children are taught their sex roles by their parents, friends, and society, from infancy to adulthood.

28. Have children make a collage showing life versus death.

29. Class discussion allowing students to express their feelings on a death experience they have encountered.

30. As we all know it is important for teenagers and their parents to communicate. This is a simple and interesting way to illustrate to the young people in your classroom the communication gap and some possible solutions.
On a piece of paper, have the students write fifteen things which are important to them. When this is completed, draw three columns next to the list. In the first column have the students check the items which they do not discuss with anyone. In the second column, check those which are discussed with friends only. In the third, check off the things which are discussed with their parents.
When the list is completed, use this as a jumping off point for classroom discussion.

31. This activity could easily be done in conjunction with the English teachers. Most students by this age have read or are reading The Adventures of Huckleberry Finn or The Adventures of Tom Sawyer by Mark Twain. A written report on either one of these books could deal with the developmental tasks that each boy had to master on his road to maturity in comparison to the developmental tasks of today's teenagers. How are they similar and how do they differ?

32. A great deal can be learned about emotional behavior from role-playing situations. A group of students can write a short skit to show how friction can develop between two friends. They might use a situation in which a decision made by one is rejected by the other. If the skit ends with the two friends angrily walking away from each other, members of the class can then suggest ways in which the conflict might have been resolved and the friendship saved. This same technique can be used with a conflict plot, i.e. teenager and parent, teenager and teacher.

33. An interesting debate can be built around the song entitled "Patterns" in which Paul Simon tells of the patterns that govern and direct his life. The debate would deal with the idea whether or not our lives are governed by fixed patterns.

RESOURCES

Books:

Conundrum, Jan Morris, 1974

From Conception to Birth: The Drama of Life's Beginnings, Robert Rugh, Harper and Row

Helping Your Child to Understand Death, Anna Wolf, 1973

Love and the Facts of Life, Evelyn Duvall, 1963

Reproduction, Sex, and Preparation for Marriage, Crowley, Lawrence, 1973

Secret World of the Baby, Beth Day, 1968

Films:

Caterpillar, BOCES #832-142, 16 minutes

Emperor's New Armor, BOCES #831-362, 6 minutes

Growing Pains, BOCES #832-297, 13 minutes

Have a Healthy Baby, BOCES #832-90, 16 minutes

Human Reproduction, BOCES #832-53, 20 minutes

I Just Don't Dig Him, BOCES #831-212, 12 minutes

Love to Kill, BOCES #832-215, 16 minutes

Perfect Race, BOCES #832-347, 20 minutes

Spaces Between People, BOCES #832-221, 16 minutes

Social Side of Health, BOCES #831-193, 10 minutes

Then One Year, BOCES #832-337, 19 minutes

Understanding Stresses and Strains, BOCES #831-190, 10 minutes

Upturned Face, BOCES #831-336, 10 minutes

Violence Just For Fun, BOCES #832-223, 16 minutes

Walls and Windows, BOCES #832-341, 13 minutes

You See, I've Had a Life, BOCES #842-52, 32 minutes

Games:

Body Talk, BOCES #110-25

Can of Squirms, (High School), BOCES #110-16

Feelin', BOCES #110-24

Generation Rap, BOCES #110-13

Police Patrol, BOCES #110-13

The Ungame: Tell It Like It Is, BOCES #110-29

Why Am I Afraid To Tell You Who I Am?, BOCES #110-12

You!, BOCES #110-23

Chart:

Human Reproduction, BOCES #CH-3

Model:

Human Development, BOCES #MO-1

Kits:

Posters Without Words, BOCES #123-16

Search for Meaning, BOCES #123-12, value clarification activities

ENVIRONMENTAL HEALTH

OVERVIEW

The interrelationship between man and his environment is vital for the survival of the human species. Because of technological advances, man must prevent ecological imbalances in the air, water, and land in order to guarantee the survival of society as we know it. It is important that each individual attain an awareness of accurate facts and understandings which deal with safeguarding our ecological milieu and the conglomerate health of mankind.

OBJECTIVES

Suggested Pupil Outcomes:

1. An awareness of the uses and misuses of water, land, and air.
2. Understand the interrelationship between man's health and his biological environment.
3. Evaluate the use and abuse of nuclear energy.
4. Recognize how public agencies work to protect the health of the community.

MAJOR CONCEPTS

1. Man depends on the organic and inorganic world around him in order to survive.
2. The environment has a significant effect on individual and community health.
3. Nuclear energy can be both beneficial and harmful to man's environment.
4. Public Health services help to maintain a healthy community.

CONTENT OUTLINE

I. Components of Man's Environment
   A. Physical factors
      1. Water
      2. Soil
      3. Air
      4. Climate
   B. Biological factors
      1. Harmful and beneficial plants
      2. Harmful and beneficial animals

II. Man's Health Due to His Environment
   A. Air
      1. Necessity for oxygen
      2. Disposal of carbon dioxide
      3. Pollutants
         a. Factories
         b. Transportation
         c. Pesticides
         d. Power plants
         e. Open dumps
   B. Water
      1. Pure water for cellular use
      2. Water containing pathogens
      3. Pollutants
         a. Industrial
         b. Sewage
         c. Detergents
         d. Insecticides
         e. Motor boats
   C. Soil
      1. Uncontaminated for good growth
      2. Soil containing pathogens
      3. Urbanization taking needed soil areas
   D. Climate extremes
      1. Diseases associated with high climate temperatures
      2. Diseases associated with low climate temperatures

III. Nuclear Energy in the Environment
   A. Harmful effects
      1. Fall-out
      2. Disease/disorders
      3. Chromosomal mutations
      4. Destruction of large land areas
   B. Beneficial effects
      1. Electrical energy
      2. Submarines
      3. Air transportation

IV. Agencies Used to Keep a Community Healthy

A. Board of Health
   1. Communicable disease control
   2. Vital statistics
   3. Sewage disposal
   4. Garbage disposal
   5. Milk and water control

B. State Department
   1. Air pollution
   2. Stream pollution
   3. Industrial waste control
   4. Enforcement of sanitary laws

C. Federal Agencies
   1. Department of Health, Education, and Welfare
   2. Department of Agriculture

LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss how technological advances may further upset our ecology.
2. Make a bulletin board showing how man interacts with his environment.
3. Discuss the effects of no water, air, food on society.
4. Make models showing an unpolluted water supply and a polluted water supply.
5. Take a field trip to discover how many industries are polluting the atmosphere.
6. Have the students research air pollution in Cortland County.
7. Discuss the pollution of the Tioughnioga River.
8. Invite a public health official to explain how the agency protects the individual in environmental health.
9. Discuss the various ways that the effect of temperature affects man's health.
10. Write letters to federal and state agencies to see what is being done to protect our environment from pollution.
11. Borrow a geiger counter from the science department and have students check out radiation in the classroom, labs, any black light source, and T.V.
12. Using professional sources, analyze statements concerning the effects of insecticides on insects and humans.
13. Develop in the students an interest in recyling of materials.
14. Examine specimens from streams and ponds in the area in order to see the number of organisms that grow in the water.
15. Make a word collage for the bulletin board related to a clean environment.
16. One or the major problems in developing faster-than-sound aircraft is the resulting "sonic boom." A written report on this topic, and how it affects the lives of people, would be an interesting investigation.

RESOURCES

Books:

Environmental Health, P. Walton Purdom, Academic Press, New York

The Silent Spring, Rachel Carson

Films:

Air Is For Breathing, Shell Oil Company, Color, Free Loan

Cities In Crisis, BOCES #832-70, 21 minutes

Commitment, filmstrip and record, International Paper Company, Free Loan

Cry of the Marsh, BOCES #832-237, 12 minutes

Ecology: Checks and Balances, BOCES #832-249, 14 minutes

The Great American Trash Can, American Glass Container Company, Free Loan

Peace and Voices In the Wilderness, BOCES #831-235, 9 minutes

Two Yosemites, BOCES #831-179, 10 minutes

Games:

Baldicer, BOCES #110-7 (Feeding the world's population)

Conflict, BOCES #110-17

Earth Resources Monitoring From Space, BOCES #110-32

Planet Management Game, BOCES #110-9

Pollution, BOCES #110-8

Star Power, BOCES #110-18

Other Sources:

New York State Conservation Department
Niagara Mohawk

CONSUMER HEALTH

OVERVIEW

Good health is a desire of all people, but one cannot escape the fact that proper practices in selection of medical personnel and approved medication are necessary for the protection of the individual. The teenager eventually becomes the adult consumer. Therefore, scientific fact and knowledge in health are important facets in allowing the student to choose an evaluative system in getting the best buys for his money. He must learn to understand his rights as a consumer in our society since his personal interests are at stake.

OBJECTIVES

Suggested Pupil Outcomes:

1. Discriminate critically between reliable and unreliable health information and advertising.

2. Avoid the dangers of medical neglect, self-diagnosis and self-treatment.

3. Know how to select and evaluate competent medical, dental, and other health personnel and services.

4. Appreciate and understand the functions of consumer organizations and health agencies and their responsibilities in supporting and promoting health programs.

MAJOR CONCEPTS

1. It is the individual's responsibility to learn to measure the reliability of the great variety of health products and services available.

2. Self-diagnosis and treatment can endanger health.

3. The Food and Drug Administration and the Federal Trade Commission are responsible for the safety, effectiveness, and advertising of prescription and over-the-counter drugs.

4. A person must be able to select qualified and competent medical, dental, and allied health personnel and services.

5. The identifying and analyzing of pseudo-scientific personnel, practices, nostrums, and devices are necessary to protect one's health.

CONTENT OUTLINE

I. Evaluating Health Information
   A. Reliable sources
      1. Medical doctors
      2. Dentists
      3. Health department
      4. Pharmacists
   B. Unreliable sources
      1. Mass media
         a. T.V.
         b. House to house peddling
         c. Newspaper
         d. Mail order gimmicks
      2. "Friendly" advice
   C. Consumer motivation
      1. Motives
      2. Consumer purchasing patterns
      3. Teenage consumer

II. Relationship of Health Information to Personal Health Status
   A. Proper medical care
      1. Regular medical check-up
      2. Use of prescription drugs
   B. Unreliable health related practices

III. Agencies Responsible for Human Health
   A. Food and Drug Administration
      1. Safety of drugs
      2. Effectiveness of drugs
      3. Advertising claims of medical practitioners
   B. Federal Trade Commission
      1. Validity of over-the-counter drug advertising
      2. Removal of products from the market if false claims are not corrected

IV. Selection of Qualified, Competent, Medical Practitioners
   A. Medical specialists
   B. Para-medical specialists

V. Fraudulent Consumer Information
   A. What is a quack?
      1. Recognizing a quack
      2. Common quack approaches
      3. Hazards of quackery
   B. Why people consult medical frauds
      1. Fear
      2. Lack of information
      3. Emotional appeals of nostrums and devices
      4. Specific cases and kinds of quackery

LEARNING AND EVALUATIVE ACTIVITIES

1. How much do you think it costs to place a full-page cigarette ad in a national magazine or a large-circulation newspaper? Have the students write to several publication companies and inquire about the cost of advertising. This information can be compiled to make an interesting bulletin board. Discuss the cost of advertising this particular product. Make a comparison with other products, i.e. regular aspirin to brand named aspirin.

2. Analyze advertisements for "sense appeal". Determine which sense the advertisement is directed toward; what claims are made; how realistic the claims are, and whether the advertising message is direct or implied.

3. Bring an empty OTC drug bottle to class and an advertisement for this product. Read the wording on the box or label carefully to the class. Ask the following questions:

   What precautions are suggested?
   Are possible side-effects mentioned?
   Is there an indication that the drug could be poisonous? If so, is an antidote specified?

   Now read the ad to the class. Are side-effects, precautions, or possible poisonous properties mentioned?

4. On a poster board, make a copy of a label from a prescription drug. Use this display to discuss the usefulness of a prescription. You may find that many of the young people in your classroom do not understand the purpose of all the items on the label or why it is important to take the drug in its entirety at the times which were directed by the doctor unless side-effects occur.

5. Many science-fiction stories, novels, and movies talk about a future where mind control by drugs will be common. Examples of these are: Brave New World and Walden II. Have the students report on this type of book and include such information as:

   What kinds of drugs were used?
   Are the drugs like any which exist today?
   How would the student feel about a world where mind control by drugs is common?

   Some of the students might like to use their creativity and actually write a short story using fictitious drugs which have strange effects.

6. Many health products are advertised seasonally and in certain types of media. Using ads from magazines, prepare a display of these ads. Group the ads in such a way that the viewer can recognize the seasonal nature of the ad, as well as the age group for whom the product is intended. For example: nose drops and cough remedies in the winter and suntan lotions in the summer.

7. Is there a difference in the techniques used by tobacco advertising agencies and the ones used by liquor advertising agencies. Using pictures from magazines and newspapers, compare the advertising techniques of these two agencies.

8. In his book The Hidden Persuaders, Vance Packard described how advertisements help to influence our actions. A group of student could report on this book with their greatest emphasis on how ad makers play on human emotions and drives to influence buying habits.

RESOURCES

Books:

Careers in the Health Field, Lee, Messner Publishing, 1973

Chinese Acupuncture, Dr. Wee Wei Ping, 1973

Devils, Drugs and Doctors, Howard Haggard, 1946

Earth Medicine - Earth Foods, Michael A. Weiner, 1972

Fraud, E.J. Kahn Jr., 1973

The Great Patent Medicine Era, Adaline Heckplinger, 1970

The Golden Age of Quackery, Stewart Holbrook, 1959

The Hidden Persuaders, Vance Packard, David McKay Co., Inc., 1957

The Indian Folk Medicine Guide, J.I. Lighthall

Medicines From the Sea, James R. Berry, 1972

The Medicine Show, Consumer Reports, 1971

Two Hundred Million Guinea Pigs; New Dangers In Everyday Foods, Drugs, and Cosmetics, John G. Fuller, 1972

Films:

Acupuncture, An Exploration, BOCES #832-280, 16 minutes

Brand Names and Labeling Games, BOCES #831-358, 9 minutes

Consumer Power: Advertising, BOCES #832-183, 22 minutes

Is A Career In Health Services For You, BOCES #832-309, 14 minutes

Label Logic, BOCES #832-40, 18 minutes

This Is Fraud, BOCES #831-351, 9 minutes

Game:

Consumer, BOCES #110-3

Kit:

Persuasion Box, BOCES #123-27

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SAFETY

OVERVIEW

Knowledge about what one is doing enters into accident prevention. Young people need to become more aware of the activities associated with safe and unsafe living. The challenge to the teacher is to provide experiences which will be both meaningful and continuous.

OBJECTIVES

Suggested Pupil Outcomes:

1. Formulate and execute reasonable safety precautions in daily living.

2. Understand and express the idea that accidents are caused by human and environmental factors.

3. Recognize that there is a relationship between one's activities, attitudes, emotions, and accidents.

4. Analyze the potential influence on the individual of personal drives, desires, and social pressures in participating in risk-taking activities.

MAJOR CONCEPTS

1. Through student education, the possibilities for emergencies affecting young people can be reduced.

2. There is an interdependence of individuals and groups in safety.

3. Safety and accident prevention should be a continuous effort.

4. Shunning social pressures may be necessary in avoiding participation in risk-taking activities that break safety rules.

CONTENT OUTLINE

I. Emergencies Which Affect Young People
   A. Safe behavior and attitudes
   B. Specific places where safety is important
      1. Home
      2. School
      3. Teenage jobs
         a. Babysitting
         b. Agriculture
         c. Lawn mowing
      4. Recreation
         a. Swimming
         b. Biking
         c. Motorcycling
         d. Skiing
         e. Camping
         f. Hiking
         g. Hunting and fishing
      5. Pedestrian safety
   C. Specific emergencies
      1. Fire
      2. Weather
      3. Poisonings
         a. Drugs
         b. Toxic gases
         c. Household chemicals
      4. Asphyxiation
      5. Near electrocution
      6. Explosives
   D. Responsibility in a nuclear attack

II. Interrelationships of Individuals and Groups in Safety
   A. Individual responsibility
   B. Group responsibility
   C. Mass hysteria

III. Prevention is a Continuous Effort
   A. At home
   B. At school
   C. In the community

LEARNING AND EVALUATIVE ACTIVITIES

1. Arrange with the school principal to let the class plan and supervise a fire drill. They should assess the rapidity with which the building is emptied, the orderliness and the manner in which instructions are or are not followed. Perhaps there will be some excellent suggestions for improvement.

2. With adult supervision, perform a test to determine how far can be seen at night on a highway. Select a quiet spot such as the school parking lot. Determine the distance a person in a parked car can see if his lights are on high and low; if the pedestrian is wearing dark clothes; if he is wearing a small amount of white; if he is wearing a sizeable area of white, or if he is carrying a flashlight. Compare these distances with charts which show how far an automobile travels before coming to a stop at various speeds.

3. Have the students do a home safety check and list safe and unsafe practices carried out in the home.

4. Plan a "brainstorming session" for the class and discuss the ways in which the positive approach to safety contributes to the improvement of society.

5. Bulletin board - newspaper clippings of accidents which were caused by various unsafe practices. Have the students analyze the cause of the accident and suggest ways it could have been prevented.

5. Have the students discuss the ways in which they are more "on their own" and, therefore, the ways their safety roles are changing.

6. Discuss the varying human factors which contribute to accidents.

7. Discuss the common hazards and accidents which occur in the home. Have the class conclude how they could be corrected or have been prevented.

8. Group reports to the class describing safety precautions for their favorite recreational activities.

9. Have the students determine the frequency of pedestrian accidents. Do they tend to occur at common locations? Times?

10. Have the students make safety posters.

11. Group report on safety precautions that should be followed before, during, and after a servere storm.

12. Have the students draw a diagram of the emergency escape routes from their bedrooms to safety.

13. A great many superstitions are related to safety. Research reports can be prepared dealing with superstitions and safety in which the students can try to answer:

    What are superstitions?
    How valid are superstitions?
    Do superstitions really help to protect us against hazards?

RESOURCES

Films:

Fire: Two Ways Out, BOCES #831-365, 11 minutes

Ice Safety, Boy Scout Office, 39 Central Avenue

Mini-Bike, BOCES #833-110, 27 minutes

To a Babysitter, BOCES #832-338, 14 minutes

FIRST AID

OVERVIEW

It could be said that knowledge of first aid techniques is a civic responsibility that each citizen owes to himself and his neighbors. In case of a natural diaster, such as floods, high winds, fire, etc. or an enemy attack, each citizen that can administer first aid is an invaluable aid to medical personnel. The first aider may be able to prevent permanent physical disability, ease pain and suffering, and even save lives with his special training. If the first aider is injuried and unable to help himself he may be able to direct others in his own care and in caring for others around him.

In order to live through an almost impossible situation a person does NOT need the reflexes of a Grand Prix driver or the ingenuity of 007. The person does need to know what to do. It could save his life and others!

OBJECTIVES

Suggested Pupil Outcomes:

1. Express in one's own words the idea that first aid is immediate, temporary help given to the victim of an accident, sudden illness, or a diaster until medical help is obtained.
2. Understand and explain how to effectively care for priority first aid needs.
3. Evaluate first aid needs of the injured.
4. Establish safe guidelines for administering first aid.

MAJOR CONCEPTS

1. The individual should be able to recognize and handle emergencies which occur in everyday living requiring first aid.

2. An appreciation of first aid procedures should be developed to help minimize injuries and save lives.

3. The student should become aware of the responsibilities involved in administering first aid in various emergency and disaster situations..

CONTENT OUTLINE

I. Introduction to First Aid
   A. Definition
   B. Values of first aid training and personal responsibilities
   C. General procedures to follow in first aid emergencies
   D. When and when not to give first aid
   E. Types of first aid and materials

II. Emergency Care of Major and Minor Injuries
   A. Major
      1. Shock
      2. Fractures
      3. Sprains
      4. Strains
      5. Bruises
      6. Dislocations
      7. Burns
      8. Wounds
      9. Poisonings
   B. First aid techniques for major emergencies
      1. Artificial respiration
      2. Bandaging and splinting
      3. Transportation
   C. Minor first aid emergencies
      1. Bee stings and insect bites
      2. Blisters
      3. Fainting
      4. Heat stroke
      5. Nosebleed
      6. Earache
      7. Slivers
      8. Convulsions
   D. First aid techniques for minor emergencies

III. Personal Responsibilities in Emergencies and Disasters
   A. The first aider
      1. Calmly takes charge
      2. Checks for sources of immediate danger
      3. Administers needed first aid
      4. Calls for help as soon as possible, if needed
   B. The injured person
      1. Usually examine to determine extent of injury
      2. Tactile and verbal reassurance
      3. Move only if necessary

LEARNING AND EVALUATIVE ACTIVITIES

1. Provide an opportunity for the students to practice artificial respiration and external heart massage. Once the various steps are known, time the students so that they will get the feeling of working under pressure.

2. Have the students divide up in pairs and practice taking a pulse.

3. Set up a work day so that the students can practice various first aid procedures. Designate specific areas in the class room for applying a pressure bandage, putting on a sling, etc. Have the class rotate to each situation.

4. Write specific first aid emergencies on separate pieces of paper. Divide the class into several small groups and let each group pick, without seeing the paper, an emergency situation. Each group will then present to the class their solution for the emergency. The group should demonstrate such things as shock position, application of an emergency splint, etc. When each group has finished their presentation, allow the class to evaluate the first aid administered for correct and incorrect procedures.

5. Demonstrate how a compress or a bandaid can be removed from its sterile packaging and applied to an injury without contamination. Allow the students to practice on each other.

6. Have a group of students write and present to class a skit on first aid emergencies.

7. Practice the methods of moving and carrying an injured person.

8. Demonstrate the first aid procedure for snake bite.

9. Make your own doll on which to practice rescue breathing. On a quart plastic bottle, punch holes for nostrils and cut out a mouth. Now snap the mouth piece of a balloon over the pouring spout of the bottle. The balloon will act as lungs. Your resusi-doll is now ready to use.

10. Many people are affected by the secretions of certain plants - poison ivy, poison oak, and poison sumac. Prepare a bulletin board display which will help people to protect themselves from contact with these plants.

RESOURCES

Books:

Emergency Care and Transportation of the Sick and Injured, The Committee on Injuries, American Academy of Orthopaedic Surgeons, George Bonta Company, Inc., 1971

Standard First Aid and Personal Safety, American Red Cross, 1973

Pamphlets:

AMA First Aid Manual, BOCES #P-28

Rescue Breathing, HIRC #P-23

Films:

Before the Emergency, Cortland County Civil Defense Office, Court House

Bleeding: What To Do, BOCES #832-284, 17 minutes

Chance to Save a Life, Boy Scout Office, 39 Central Avenue, Cortland

Life You Save, BOCES #832-318, 17 minutes

Pulse of Life, BOCES (video cassette), 27 minutes and Civil Defense Office

Understanding Stresses and Strains, BOCES #831-190, 10 minutes

Kits:

Plactoplast, (artificial wounds and injuries), BOCES #123-21

Resusci-Anne, BOCES #123-20